

1 / 36

FF1AN060.PDF

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**2 / 36**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

HUCKABEE FOR PRESIDENT, INC.

Report Covering the Period

From: 04/01/2008

To: 04/30/2008

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	1760.51	16065693.71
(b) Political Party Committees	.....	0.00	15500.00
(c) Other Political Committees	.....	0.00	59423.43
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		1760.51	16140617.14
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	38483.84	211508.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		38483.84	211508.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	30.02	13662.72
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	40274.37	16365787.86
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	76514.27	16252227.48
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	9045.16	73683.17
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	9045.16	78683.17
29. OTHER DISBURSEMENTS	.....	0.00	400.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	85559.43	16331310.65
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

3 / 36

1. NAME OF COMMITTEE (in full)**HUCKABEE FOR PRESIDENT, INC.****ADDRESS (number and street)**C/O JPMS Cox, PLLC
11300 Cantrell Road, Suite 301**CITY, STATE, and ZIP CODE**

Little Rock AR 72212

2. IDENTIFICATION NUMBER

C00431809

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 / 36

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Bobai Bahk

Mailing Address

171 Moultrie Street

MSC 96

City

Charleston

State

SC

Zip Code

29409

FEC ID number of contributing
federal political committee.

Name of Employer
The Citadel

Occupation

Library Specialist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1105.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: SA17A.274037

B.

Full Name (Last, First, Middle Initial)

Jesse Bryant

Mailing Address

1775 N. Broad Street

#12

City

Globe

State

AZ

Zip Code

85501

FEC ID number of contributing
federal political committee.

Name of Employer
Kwik Kool Refrigeration

Occupation

Laborer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 0 8

Amount of Each Receipt this Period

20.00

Transaction ID: SA17A.274039

C.

Full Name (Last, First, Middle Initial)

Della Cooley

Mailing Address

29636 Avondale Street

City

Inkster

State

MI

Zip Code

48141

FEC ID number of contributing
federal political committee.

Name of Employer
BrassCraft

Occupation

Sales

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1040.12

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Amount of Each Receipt this Period

50.01

Transaction ID: SA17A.274036

SUBTOTAL of Receipts This Page (optional)

120.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 / 36

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Lowell J. Fockler

Mailing Address

26325 Cannes Circle

City

Mission Viejo

State

CA

Zip Code

92692

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1501.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 8

Amount of Each Receipt this Period

501.00

Transaction ID: SA17A.273991

B.

Full Name (Last, First, Middle Initial)

Peter B. Hitchcock

Mailing Address

1047 Waverly Place

#2

City

Schenectady

State

NY

Zip Code

12308

FEC ID number of contributing
federal political committee.

Name of Employer
Requested

Occupation

Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

356.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

16.00

Transaction ID: SA17A.273978

C.

Full Name (Last, First, Middle Initial)

Peter B. Hitchcock

Mailing Address

1047 Waverly Place

#2

City

Schenectady

State

NY

Zip Code

12308

FEC ID number of contributing
federal political committee.

Name of Employer
Requested

Occupation

Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

15.00

Transaction ID: SA17A.273985

SUBTOTAL of Receipts This Page (optional)

532.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 36

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Peter B. Hitchcock

Mailing Address

1047 Waverly Place

#2

City

Schenectady

State

NY

Zip Code

12308

FEC ID number of contributing
federal political committee.

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

386.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

15.00

Transaction ID: SA17A.274091

B.

Full Name (Last, First, Middle Initial)

Peter B. Hitchcock

Mailing Address

1047 Waverly Place

#2

City

Schenectady

State

NY

Zip Code

12308

FEC ID number of contributing
federal political committee.

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

15.00

Transaction ID: SA17A.274092

C.

Full Name (Last, First, Middle Initial)

Peter B. Hitchcock

Mailing Address

1047 Waverly Place

#2

City

Schenectady

State

NY

Zip Code

12308

FEC ID number of contributing
federal political committee.

Name of Employer
Requested

Occupation
Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 9 / 2 0 0 8

Amount of Each Receipt this Period

15.00

Transaction ID: SA17A.274096

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 36

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Deborah Mulholand

Mailing Address

120 Waterfront Place

City

Dayton

State

OH

Zip Code

45458

FEC ID number of contributing
federal political committee.

Name of Employer
Dunlevey Mahan & Furry

Occupation

Legal Secretary

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.48

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

20.00

Transaction ID: SA17A.274038

B.

Full Name (Last, First, Middle Initial)

Deborah Mulholand

Mailing Address

120 Waterfront Place

City

Dayton

State

OH

Zip Code

45458

FEC ID number of contributing
federal political committee.

Name of Employer
Dunlevey Mahan & Furry

Occupation

Legal Secretary

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

720.48

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

20.00

Transaction ID: SA17A.274040

C.

Full Name (Last, First, Middle Initial)

Beth Nichols

Mailing Address

P.O. Box 39803

City

Lakewood

State

WA

Zip Code

98496

FEC ID number of contributing
federal political committee.

Name of Employer
Fisher Jones Family Denti-
stry

Occupation

Registered Dental Hygienist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

760.08

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: SA17A.273994

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 36

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Beth Nichols

Mailing Address

P.O. Box 39803

City

Lakewood

State

WA

Zip Code

98496

FEC ID number of contributing
federal political committee.

Name of Employer
Fisher Jones Family Denti-
stry

Occupation

Registered Dental Hygienist

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

785.08

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Amount of Each Receipt this Period

25.00

Transaction ID: SA17A.273995

B.

Full Name (Last, First, Middle Initial)

Joanne Rush

Mailing Address

2818 Windcrest Oaks Court

City

Valrico

State

FL

Zip Code

33594

FEC ID number of contributing
federal political committee.

Name of Employer
Century 21 Fred McKay Rea-
lty, Inc.

Occupation

Realtor

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 2 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: SA17A.274035

C.

Full Name (Last, First, Middle Initial)

Barry Thomas

Mailing Address

7407 96th Street

City

Lubbock

State

TX

Zip Code

79424

FEC ID number of contributing
federal political committee.

Name of Employer
Covenant Medical Group

Occupation

Physician

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: SA17A.274032

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 36

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Carol Williams

Mailing Address

2102 E Street

City

Eureka

State

CA

Zip Code

95501

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Disabled

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

517.58

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Amount of Each Receipt this Period

50.00

Transaction ID: SA17A.274041

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

1037.01

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) ABC News Mailing Address 917 Indian Creek Lane City State Zip Code Crownsville MD 21032 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1472.07	Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8 Amount of Each Receipt this Period 1472.07 Press Travel Reimbursement Transaction ID: SA20A.274183
B. Full Name (Last, First, Middle Initial) Arkansas Democrat Gazette Mailing Address 121 E. Capitol Avenue City State Zip Code Little Rock AR 72201 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4830.00	Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 8 Amount of Each Receipt this Period 4830.00 Press Travel Reimbursement Transaction ID: SA20A.274142
C. Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 650661 City State Zip Code Dallas TX 75265 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1224.69	Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 0 8 Amount of Each Receipt this Period 653.08 Refund Transaction ID: SA20A.274152

SUBTOTAL of Receipts This Page (optional)

6955.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 36

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)
CNN

Mailing Address
One CNN Center

City State Zip Code
Atlanta GA 30303

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4830.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

4830.00

Press Travel Reimbursement

Transaction ID: SA20A.274135

B.

Full Name (Last, First, Middle Initial)
CNN

Mailing Address
One CNN Center

City State Zip Code
Atlanta GA 30303

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

623.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

623.33

Press Travel Reimbursement

Transaction ID: SA20A.274139

C.

Full Name (Last, First, Middle Initial)
Dresner, Wickers Associates, LLC

Mailing Address
655 Third Street

City State Zip Code
San Francisco CA 94107

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5999.93

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

5999.93

Refund

Transaction ID: SA20A.274156

SUBTOTAL of Receipts This Page (optional)

11453.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 36

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Los Angeles Times</p> <p>Mailing Address 202 W. 1st Street</p> <p>City State Zip Code Los Angeles CA 90012</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 833.82</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A.274136</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) NBC News & National Journal Group</p> <p>Mailing Address 30 Rockefeller Center</p> <p>City State Zip Code New York NY 10112</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 5663.82</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A.274140</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Newsweek</p> <p>Mailing Address 251 W. 57th Street</p> <p>City State Zip Code New York NY 10019</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 1 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 4830.00</p> <p>Press Travel Reimbursement</p> <p>Transaction ID: SA20A.274141</p>

SUBTOTAL of Receipts This Page (optional)

11327.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 36

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Oklahoma Secretary of State

Mailing Address

2300 N. Lincoln Boulevard, Ste 101 Elections Board

City

State

Zip Code

Oklahoma City

OK

73105

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 1 / 2 0 0 8

Amount of Each Receipt this Period

2500.00

Refund

Transaction ID: SA20A.274154

B.

Full Name (Last, First, Middle Initial)

Pinnacle Air, LLC

Mailing Address

333 Pinnacle Hills Parkway Suite 400

City

State

Zip Code

Rogers

AR

72758

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

553.68

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

553.68

Refund

Transaction ID: SA20A.274158

C.

Full Name (Last, First, Middle Initial)

Qwest

Mailing Address

70 W. Fourth Street, Floor 10

City

State

Zip Code

St. Paul

MN

55102

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4990.80

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 8

Amount of Each Receipt this Period

4990.80

Refund

Transaction ID: SA20A.274149

SUBTOTAL of Receipts This Page (optional)

8044.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Barbara Webb

Mailing Address

787 Marengo Drive

City

State

Zip Code

Troy

MI

48085

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Blackberry Purchase

Transaction ID: SA20A.274178

B.

Full Name (Last, First, Middle Initial)

Gay White

Mailing Address

One Andover Drive

Apt. 7

City

State

Zip Code

Little Rock

AR

72227

FEC ID number of contributing
federal political committee.

Name of Employer
Huckabee for President Ex-
ploratory Com

Occupation

Administrative Assistant

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 0 4 / 2 0 0 8

Amount of Each Receipt this Period

300.00

Computer Purchase

Transaction ID: SA20A.274179

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

38180.53

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 36

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Delta Trust & Bank

Mailing Address

11700 Cantrell Road

City

Little Rock

State

AR

Zip Code

72222

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13662.72

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Amount of Each Receipt this Period

30.02

Interest Income

Transaction ID: SA21.274144

SUBTOTAL of Receipts This Page (optional)

30.02

TOTAL This Period (last page this line number only)

30.02

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Alltel Mailing Address P.O. Box 9001905	Transaction ID: SB23.274048 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div>
City State Zip Code Louisville KY 40290 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>187.89</div>
B. Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 650661 City State Zip Code Dallas TX 75265 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274051 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1497.27</div>
C. Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 650661 City State Zip Code Dallas TX 75265 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274055 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1695.80</div>

SUBTOTAL of Disbursements This Page (optional) ►

3380.96

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: SB23.274058 Date of Disbursement
Mailing Address P.O. Box 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div>
City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Service	<div>4044.20</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Matt Chandler	Transaction ID: SB23.274057 Date of Disbursement
Mailing Address P.O. Box 616	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div>
City Sumas State WA Zip Code 98295	Amount of Each Disbursement this Period
Purpose of Disbursement Media Production	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Comcast Cablevision	Transaction ID: SB23.274009 Date of Disbursement
Mailing Address P.O. Box 105184	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 3 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30348	Amount of Each Disbursement this Period
Purpose of Disbursement Office Expense - Cable Service	<div>102.26</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6146.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Judith Crouch Mailing Address 59 Belmont Drive	Transaction ID: SB23.274020 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div>
City Little Rock State AR Zip Code 72204 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>2125.00</div>
B. Full Name (Last, First, Middle Initial) Delta Trust & Bank Mailing Address 11700 Cantrell Road City Little Rock State AR Zip Code 72222 Purpose of Disbursement Service Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274132 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>9.76</div>
C. Full Name (Last, First, Middle Initial) Jennifer Hatten Mailing Address 4505 Harding Pike #157 City Nashville State TN Zip Code 37205 Purpose of Disbursement Travel Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274013 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1001.61</div>

SUBTOTAL of Disbursements This Page (optional)

3136.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jennifer Hatten</p> <p>Mailing Address 4505 Harding Pike #157</p> <p>City Nashville State TN Zip Code 37205</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274016</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1047.15</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mike Huckabee</p> <p>Mailing Address 1134 Silverwood Trail</p> <p>City North Little Rock State AR Zip Code 72116</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name Mike Huckabee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274012</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 827.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sarah Huckabee</p> <p>Mailing Address 703 Cedar Ridge Drive</p> <p>City Little Rock State AR Zip Code 72211</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274021</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2125.00</p>

SUBTOTAL of Disbursements This Page (optional)

3999.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Huckaby, Davis, Lisker</p> <p>Mailing Address 228 South Washington Street Suite 115</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Consulting - Compliance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274006</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 754.42</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hughes-Trigg Student Center</p> <p>Mailing Address P.O. Box 750211 3140 Dyer</p> <p>City Dallas State TX Zip Code 75275</p> <p>Purpose of Disbursement Event Venue Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274049</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1422.04</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Thomas Drake Jarman</p> <p>Mailing Address 2200 Riverfront Drive Apt. 7305</p> <p>City Little Rock State AR Zip Code 72201</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274022</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)

3176.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) David John	Transaction ID: SB23.274023 Date of Disbursement
Mailing Address 15 Thankful Bradley Road	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 01 / 2008</div> </div>
City West Redding State CT Zip Code 06896	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div>1000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JPMS Cox, PLLC	Transaction ID: SB23.274145 Date of Disbursement
Mailing Address 11300 Cantrell Road Suite 301	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 21 / 2008</div> </div>
City Little Rock State AR Zip Code 72212	Amount of Each Disbursement this Period
Purpose of Disbursement Accounting & Compliance Fees	<div>36163.35</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Optus, Inc.	Transaction ID: SB23.274017 Date of Disbursement
Mailing Address P.O. Box 2503	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 14 / 2008</div> </div>
City Jonesboro State AR Zip Code 72402	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone Equipment Removal	<div>305.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

37468.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274026</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 973.87</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274128</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 489.23</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex, Inc.</p> <p>Mailing Address 12921 Cantrell Road Suite 100</p> <p>City Little Rock State AR Zip Code 72223</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274134</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 183.45</p>

SUBTOTAL of Disbursements This Page (optional)

1646.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Paypal, Inc. Mailing Address 4100 Solutions Center #774100	Transaction ID: SB23.274027 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 3 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>104.42</div>
B. Full Name (Last, First, Middle Initial) Paypal, Inc. Mailing Address 4100 Solutions Center #774100 City Chicago State IL Zip Code 60677 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274028 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>134.51</div>
C. Full Name (Last, First, Middle Initial) David Polyansky Mailing Address 3932 Marquette Street City Houston State TX Zip Code 77005 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274024 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>579.68</div>

SUBTOTAL of Disbursements This Page (optional) ►

818.61

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Jordan Powell

Mailing Address 4529 Stonewall
PMB 156

City Greenville State TX Zip Code 75401

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.274025

Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Andrew Robertson

Mailing Address 515 S. Illinois Street

City Monticello State IN Zip Code 47960

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.274061

Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

4000.00

C.

Full Name (Last, First, Middle Initial)

Shred-it Arkansas

Mailing Address 7705 Northshore Place

City North Little Rock State AR Zip Code 72118

Purpose of Disbursement

Office Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.274004

Date of Disbursement

04 / 03 / 2008

Amount of Each Disbursement this Period

135.00

SUBTOTAL of Disbursements This Page (optional)

5135.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Silent Wings Museum</p> <p>Mailing Address 6202 N I-27</p> <p>City Lubbock State TX Zip Code 79403</p> <p>Purpose of Disbursement Event Venue Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274007</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jo Smith</p> <p>Mailing Address 19 Deerwood Drive</p> <p>City Conway State AR Zip Code 72034</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274029</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 60.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Brad Tashenberg</p> <p>Mailing Address 210 M Street SW</p> <p>City Washington State DC Zip Code 20024</p> <p>Purpose of Disbursement Travel Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.274053</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1659.28</p>

SUBTOTAL of Disbursements This Page (optional)

2219.28

TOTAL This Period (last page this line number only)

X	23		24		25		26		27a
	27b		28a		28b		28c		29

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Texas A&M University	Transaction ID: SB23.274002 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 03 / 2008</div> </div>
Mailing Address P.O. Box M-1	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center; font-size: 1.2em;">2459.57</div>
<div>City College Station</div> <div>State TX</div> <div>Zip Code 77844</div>	
<div style="flex: 1;"> Purpose of Disbursement Event Venue Rental </div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
<div style="flex: 1;">Candidate Name</div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) The Park at Riverdale	
Mailing Address 2200 Riverfront Drive	Transaction ID: SB23.274001 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 02 / 2008</div> </div>
Mailing Address 2200 Riverfront Drive	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center; font-size: 1.2em;">188.67</div>
<div>City Little Rock</div> <div>State AR</div> <div>Zip Code 72202</div>	
<div style="flex: 1;"> Purpose of Disbursement Rent </div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
<div style="flex: 1;">Candidate Name</div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Time Warner Cable	
Mailing Address 3347 Platt Springs Road	Transaction ID: SB23.274018 Date of Disbursement <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>04 / 14 / 2008</div> </div>
Mailing Address 3347 Platt Springs Road	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center; font-size: 1.2em;">240.88</div>
<div>City West Columbia</div> <div>State SC</div> <div>Zip Code 29170</div>	
<div style="flex: 1;"> Purpose of Disbursement Telephone Service </div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
<div style="flex: 1;">Candidate Name</div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

2889.12

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Visa Mailing Address P.O. Box 8999	Transaction ID: SB23.274010 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	8	
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	3		2	0	0	8													
City San Francisco State CA Zip Code 94128 Purpose of Disbursement Credit Card Pmt. - No Itemization Req. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>8.95</td> </tr> </table>	8.95																				
8.95																						
B. Full Name (Last, First, Middle Initial) Visa Mailing Address P.O. Box 8999 City San Francisco State CA Zip Code 94128 Purpose of Disbursement Credit Card Payment - See Memos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274011 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>6240.41</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	8	6240.41
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	3		2	0	0	8													
6240.41																						
C. Full Name (Last, First, Middle Initial) Bearcom Rentals Mailing Address P.O. Box 200600 City Dallas State TX Zip Code 75320 Purpose of Disbursement Event Equipment Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.274011.0 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2559.49</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	3		2	0	0	8	2559.49
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	3		2	0	0	8													
2559.49																						

SUBTOTAL of Disbursements This Page (optional)

6249.36

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3P)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 / 36

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Enterprise Rent-A-Car

Mailing Address 11301 West Markham

City State Zip Code
Little Rock AR 72211Purpose of Disbursement
Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.274011.1

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Amount of Each Disbursement this Period

3571.04

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Apple Online Store

Mailing Address 1 Infinite Loop

City State Zip Code
Cupertino CA 95014Purpose of Disbursement
Refund

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.274011.5

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Amount of Each Disbursement this Period

-84.89

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

76265.67

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 36

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Augie Fabela	Transaction ID: SB28A.274118 Date of Disbursement																				
Mailing Address 7401 Bay Colony Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	4		2	0	0	8												
City Naples State FL Zip Code 34108	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">2300.00</td> </tr> </table>	2300.00																			
2300.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ruby Gerisch	Transaction ID: SB28A.274122 Date of Disbursement																				
Mailing Address 2300 Cannon Bottom Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	1		2	0	0	8												
City Belton State SC Zip Code 29627	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Stephan Kruse	Transaction ID: SB28A.274123 Date of Disbursement																				
Mailing Address 139 Long Pointe Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	1		2	0	0	8												
City Amelia Island State FL Zip Code 32034	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 36

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) Andrew Lannen	Transaction ID: SB28A.274116 Date of Disbursement																				
Mailing Address 10001 Ashbury Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	0	8												
City Fishers State IN Zip Code 46037	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">20.08</td> </tr> </table>	20.08																			
20.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Jill Metzger	Transaction ID: SB28A.274117 Date of Disbursement																				
Mailing Address P.O Box 8266	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	0	8												
City Bossier City State LA Zip Code 71113	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Teresa Nelson	Transaction ID: SB28A.274126 Date of Disbursement																				
Mailing Address 1423 Wilson	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	0	8												
City Arkadelphia State AR Zip Code 71923	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Refund Candidate Name	<table border="1"> <tr> <td colspan="10">20.08</td> </tr> </table>	20.08																			
20.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

90.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 36

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

George C. Perreault

Mailing Address 7336 Captain Kidd Avenue

City State Zip Code
Sarasota FL 34231

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.274124

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1700.00

B.

Full Name (Last, First, Middle Initial)

Lori Smith

Mailing Address 3720 W. Ellery

City State Zip Code
Fresno CA 93711

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.274127

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)

Lyndsey Ward

Mailing Address 8932 Crest Wood Drive

City State Zip Code
Fort Worth TX 76179

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.274121

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)

4005.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3P) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 36

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

Lori K. Weems

Mailing Address 4487 SW 16 Street

City State Zip Code
Miami FL 33135

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.274120

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Paul Zander

Mailing Address P.O. Box 772

City State Zip Code
Crossett AR 71635

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.274125

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

2350.00

TOTAL This Period (last page this line number only)

9045.16

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 / 36

FOR LINE NUMBER:
(check only one)☒ 11
☐ 12NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ABC NewsNature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 917 Indian Creek Lane

City State ZIP Code
Crownsville MD 21032

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.274166

Amount Incurred This Period

2305.89

Payment This Period

1472.07

Outstanding Balance at Close of This Period

833.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Arkansas Democrat GazetteNature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 121 E. Capitol Avenue

City State ZIP Code
Little Rock AR 72201

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.274169

Amount Incurred This Period

4893.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

4893.33

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Associated PressNature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 450 W. 33rd Street

City State ZIP Code
New York NY 10001

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.274165

Amount Incurred This Period

1205.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

1205.24

1) SUBTOTALS This Period This Page (optional).....

6932.39

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 / 36

FOR LINE NUMBER:
(check only one)

<input checked="checked" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CBS News

Nature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 524 W. 57th Street

City	State	ZIP Code
New York	NY	10019

Outstanding Balance Beginning This Period

12377.24

Transaction ID: SD11.273967

Amount Incurred This Period

16191.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

28568.89

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CNN

Nature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address One CNN Center

City	State	ZIP Code
Atlanta	GA	30303

Outstanding Balance Beginning This Period

5453.33

Transaction ID: SD11.208560

Amount Incurred This Period

9199.74

Payment This Period

5453.33

Outstanding Balance at Close of This Period

9199.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fox News

Nature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 400 N. Capitol Street NE

City	State	ZIP Code
Washington	DC	20001

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.274167

Amount Incurred This Period

4830.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4830.00

1) SUBTOTALS This Period This Page (optional).....

42598.63

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 / 36

FOR LINE NUMBER:
(check only one)☒ 11
☐ 12NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
NBC News & National Journal GroupNature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 30 Rockefeller Center

City State ZIP Code
New York NY 10112

Outstanding Balance Beginning This Period

5663.82

Transaction ID: SD11.273966

Amount Incurred This Period

672.66

Payment This Period

5663.82

Outstanding Balance at Close of This Period

672.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ReutersNature of Debt (Purpose):
Press Travel Reimbursement

Mailing Address 1333 H Street NW

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.274172

Amount Incurred This Period

833.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

833.82

1) **SUBTOTALS** This Period This Page (optional).....

1506.48

2) **TOTALS** This Period (last page this line number only).....

51037.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

51037.50

SCHEDULE D (FEC Form 3P)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 36 / 36

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
HUCKABEE FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Holtzman Vogel, PLLC

Nature of Debt (Purpose):
Consultants - Legal

Mailing Address 98 Alexandria Pike
Suite 53

City State ZIP Code
Warrenton VA 20186

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.274159

Amount Incurred This Period

7912.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

7912.23

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Imaginaire

Nature of Debt (Purpose):
Travel

Mailing Address 4553 Glenn Curtiss Drive

City State ZIP Code
Addison TX 75001

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.274160

Amount Incurred This Period

30373.05

Payment This Period

0.00

Outstanding Balance at Close of This Period

30373.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JPMS Cox, PLLC

Nature of Debt (Purpose):
Accounting & Compliance
Fees

Mailing Address 11300 Cantrell Road
Suite 301

City State ZIP Code
Little Rock AR 72212

Outstanding Balance Beginning This Period

72326.70

Transaction ID: SD12.266187

Amount Incurred This Period

0.00

Payment This Period

36163.35

Outstanding Balance at Close of This Period

36163.35

1) **SUBTOTALS** This Period This Page (optional).....

74448.63

2) **TOTALS** This Period (last page this line number only).....

74448.63

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

74448.63